Effective October 1, 2003													M
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN		OR		R THAN ENTITY
TOTAL CLAIMS			10					RATE		FEE		RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC F	EΕ	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			10 minus 20=		•			X\$ 9=			OA	X\$16=	·
INDEPENDENT CLAIMS			← minus 3 =		•	1		X43=	7	12	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145:	Ť	7	OR	-290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								ŢOTAI		178	OR		
I Golumn 1) (Column 2) (Column 3)								SMAL	L EN	ITITY	OR	OTHER SMALL	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	ST SER USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	. 5	Minus	-2	0	- Ø		XS 9=		1	OR	X\$18≈	1
	independent	- 2	Minus	1	<u>ا ا</u>	- Ø		X43=	T	$\neg T$	ОЯ	X86=	
	FIRST PRESE	NTATION OF MI	JUTIPLE DE	PENDENT	CLAIM			+145=	T	1	OR	+290=	. /
1 /0/0								TOYA		+	OR	TOTAL ADDIT, FEE	
0	6/12/01	(Column 1)		(Colum	າກ 2)	(Column 3)	. '	ADDIT. FE	ندا ۵		•	AUDIT. PEE	·
AMENDMENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	TI	ODI- ONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 5	Minus	-20)	• (3)		X\$ 9=			OR	X\$18=	
	Incependent	NITATION OF MI	Minus I TIDI E DES	= L	CLARA	0		X43=			OR	X86≖ .	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											OR	+290=	•
ADDIT. FEE										0	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													
WEN	`	CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	TI	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		. .		X\$ 9=			OR	X\$18=	
	Independent	•	Minus	***		=	t	X43=	T		OR	X86=	
اب	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM	ان ا	t	145	T			. 200a	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT FEE											OR	+290= TOTAL	
-11	the "Highest Nun the "Highest Nun	nber Previously Pai inber Previously Pai	d For IN THIS id For IN THIS	SPACE IS I	ess than less than	20, enter "20." 3, enter "3."		DOIT. FEE	L			DOIT. FEE	
"If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												uiui I.	

Application or Docket Number